institutions—most importantly Parliament and the Crown—was more sporadic, but became increasingly frequent with the growth of state regulation and state provision of medical care from the nineteenth century onwards. These institutional interactions were further complicated by a host of other contextual factors with which the College had to contend, including the impact of major wars, the incursion of women into the medical profession and—most importantly—the enormous change in the technical capabilities of surgery over the past five centuries.

Given these many and diverse strands to the College's history, the deftest of storytellers would struggle to weave them all into a seamless whole. Dingwall opts for a broad five-part periodization, spanning the early years of the Incorporation to 1581, its consolidation to 1726, the growth of commercial medical education to 1830, the period of medical reform up to the establishment of the NHS in 1948, and the globalization of medicine since the Second World War. Within this framework, she occasionally gestures towards a unifying view of the College as a participant in an expanding Habermasian public sphere, but the idea is scarcely developed and does little to resolve the rather episodic nature of her story. Other historical processes such as specialization and professionalization remain unexamined, invoked merely as a shorthand for describing otherwise unexplained events. Meanwhile, certain aspects of the College's history—its role in public health reform, for instance, or the growth of its museum collections—are simply tacked on to the end of larger chronological chapters rather than integrated into the narrative. Consequently, the overall result is often somewhat disjointed and piecemeal, despite Dingwall's clear appreciation of the need for a more integrated evolutionary vision.

That said, there is much here for which medical historians should be grateful. Dingwall has made a deliberate and sustained attempt to move beyond the merely celebratory genre to which so many institutional histories belong. Her attention to the economics of institutional survival, and to the politics of professional

self-interest as much as public service, are particularly to be welcomed. Likewise, her careful accounting of the College's struggles for control over surgical practice and medical education help to illuminate the development of medicine not just in Edinburgh but more widely. The book itself is beautifully produced and copiously illustrated, and the subscribers whose names are recorded in the opening pages can take pride in having supported a valuable historical study as well as a handsome testament to their College's continuing vitality.

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Asa Briggs, A history of the Royal College of Physicians of London, vol. 4, 1948–1983, Oxford University Press, 2005, pp. xii, 486, illus., £60.00 (hardback 0-19-925334-X).

The writing of institutional histories is a notorious poisoned chalice. The unfortunate author is caught in a no-win situation between the Scylla and Charybdis of the expectations of the eminent Members and Fellows and those of academic historians about what constitutes an effective historical treatment. Briggs, as one would expect with his experience and talents, makes a good stab at a readable history (and it is actually possible to read this book all the way through—quite an achievement in itself given the subject matter). However, Briggs is no medical historian and has not attempted to read himself into the literature very far, apart from the standard historiography on the NHS (although there is no Rudolf Klein, no Nicholas Timmins, no Michael Foot and no Bernard Harris). This means that, while the *Comitia* might be happy with this volume, which is much less full of dry and dusty administrative details than its predecessors by George Clark and Alexander Cooke, it is very unlikely to satisfy any academics. Briggs's attempts to associate this work with academic conventions notwithstanding (see bottom of p. 1373), it addresses none of the key themes in the history of twentieth-century medicine that occupy the academic history of

medicine community. Moreover, since Briggs has gone for readability, it is also of limited use as a reference work (the one great strength of those earlier impenetrable volumes).

The other main problem with institutional history is what to write about. The RCPL is a medical examining body, but it is also the voice of the metropolitan medical elite and thus carries great weight within medicine and has some policy influence. Briggs does not examine the social/professional/epistemological basis/bases of College power or how it was maintained. He notes the clinical bias but does not comment on the College's position(s) on the relationship between clinic and laboratory. He notes (in the case of George Godber) the interpenetration of government by Members and Fellows, but fails to explore adequately the ramifications of this point. Briggs organizes his material in two ways: specific broad contextual themes (for example, the NHS 1946-68 and 1968-84, 'Smoking and health', although in this last there are no references to the work of Virginia Berridge), and catch-all general chapters like 'Five Presidents' or 'Munk's Roll'. These latter are entertaining and methodologically justifiable as prosopography, but are rather anecdotal and break up the flow of the narrative. In the former, Briggs seems to err too much on the side of general context of medical politics, rather than focusing on the role of the College. One can sometimes forget one is reading a history of the College at all, so infrequently is it mentioned. Briggs is cleverly insightful in choosing to dedicate a chapter to "communicating", although, again there is little acknowledgement of the existing secondary literature (Anne Karpf, Virginia Berridge, Kelly Loughlin, etc.).

In general there is a frustrating lack of references for large swathes of text, and a concerning tendency to cite the President's annual addresses rather than detailed minutes of the council and its committees. Surely the latter provide a better way into the day-to-day concerns of such an institution. However, once again these criticisms reflect Briggs's compromises on the book he has chosen to write: it is for the Members and Fellows and not academic historians.

Briggs's best chapter is perhaps that on the College's core activity: examining, training, educating. However, here, because of his lack of familiarity with the medical history literature, Briggs, rather ironically, given his over-attention to contextualization elsewhere, does not adequately explain how and why the Colleges developed greater roles in postgraduate medical education and examination. Most obviously lacking is any discussion of the centrality of the Goodenough Report to the evolution of British medical education, and the way it was synchronized with the new NHS to produce a regional educational structure for academic medicine based around the local intellectual powerhouses of universities and university hospitals. There is also no adequate exploration of the way the Colleges responded to specialization. This is dealt with in the literature on postgraduate medical education in the UK, and in some of the more recent histories of UK Royal Colleges. However, there is little evidence in the footnotes that Briggs has read anything about non-London Colleges, and they are certainly exceedingly rarely mentioned and never in any detail. This lack of a comparative perspective is disappointing, but will probably not unduly trouble his core audience.

Briggs's book, then, falls between two stools. Such are the perils and potential pitfalls of institutional history; but then Briggs should know that as he has written a well-received history of the BBC, another pillar of the institutional establishment. Could it be that being a famous, readable, popular historian is not the best qualification for writing the history of medical institutions?

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Esteban Rodríguez Ocaña, Salud pública en España. Ciencia, profesión y política, siglos XVIII–XX, Universidad de Granada, 2005, pp. 258, €17.00 (paperback 84-338-3627-7).

During the last decades, there have been many important studies addressing from various